



United States Senator Michael D. Crapo

Privacy Release Form

Constituent service is one of my greatest privileges as a United States Senator. I am honored to be an advocate for Idahoans who need resolution on personal issues with a federal agency.

There are many matters that I can assist with but due to the strict constitutional separation of the legislative and judicial branches of government, I cannot act as legal counsel or intervene on issues before the courts.

If you need assistance on a federal matter, please complete the form below and send it to the state office nearest you. A complete list of all my state offices is provided for your convenience.

Senator Crapo's Regional Offices

Washington D.C.

239 Dirksen Senate Building
Washington D.C., 20510
Phone: (202) 224-6142
Fax: (202) 228-1375

Idaho Falls

490 Memorial Drive Suite 102
Idaho Falls, ID 83402
Phone: (208) 522-9779
Fax: (208) 529-8367

Boise

251 East Front Street Suite 205
Boise, ID 83702
Phone: (208) 334-1776
Fax: (208) 334-9044

Lewiston

313 'D' Street Suite 105
Lewiston, ID 83501
Phone: (208) 743-1492
Fax: (208) 743-6484

Caldwell

524 East Cleveland Blvd. Suite 220
Caldwell, ID 83605
Phone: (208) 455-0360M
Fax: (208) 455-0358

Pocatello

275 South 5th Avenue Suite 225
Pocatello, ID 83201
Phone: (208) 236-6775
Fax: (208) 236-6935

Coeur d' Alene

610 Hubbard Street Suite 209
Coeur d' Alene, ID 83814
Phone: (208) 664-5490
Fax: (208) 664-0889

Twin Falls

202 Falls Avenue Suite 2
Twin Falls, ID 83301
Phone: (208) 734-2515
Fax: (208) 733-0414



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Name: _____ Phone: _____

Address: _____ City and Zip: _____

SS Number _____ Case Number: _____

Attached letters must be signed and dated.

Regarding:

Due to the Privacy Act of 1974 (PL 93-579), Federal and State agencies are prohibited from releasing information or discussing anything regarding another individual without that person's written permission. Your signature on this page authorizes me, as your Senator, to contact the proper officials on your behalf, discuss the issue, and receive any pertinent information. Your signature also gives me permission to send a copy of this form and any attached letters or supporting documentation to the appropriate agency.

Signature _____ Date: _____